

Washington State HILAB
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Stakeholder Views on Health Information Infrastructure

William A. Yasnoff, MD, PhD, FACMI
Managing Partner, NHII Advisors



HII Stakeholders

- Clinicians
- Hospitals
- Employers
- Insurers
- Laboratories
- Pharmacies/PBMs
- Pharmaceutical & Device Manufacturers
- Government
- Public Health
- Long-term Care
- Consumers

Clinicians

■ Awareness

- Widespread knowledge of HII and EHRs

■ Position

- Acknowledge EHRs & HII needed to improve care, reduce costs
- Unfavorable cost/benefit ratio is key obstacle

■ Concerns

- Business case for EHR acquisition must improve
- Use of information to unfairly evaluate their performance

Hospitals

- Awareness

- Widespread awareness of HII and EHRs

- Position

- Already investing in EHR systems
- Supportive of information used to avoid duplicate testing under DRGs (will pay for this)

- Concerns

- Sharing information that benefits competitors
- Increasing IT costs
- Reduced demand for inpatient services

Employers

■ Awareness

- Health care costs are very serious concern
- Recognize potential of HII to reduce costs, improve quality

■ Position

- Generally supportive of EHRs, HII

■ Concerns

- Lack of clear linkage between EHRs, HII, and improved performance (cost & quality)
- “Free-rider” effects of their investments

Insurers

- **Awareness**
 - **Widespread awareness of EHRs, HII**
- **Position**
 - **Cautious public support of HII**
 - **General unwillingness to contribute financially**
- **Concerns**
 - **Exaggerated estimates of financial benefits to them (amount & timing)**
 - **Elimination of potential area of advantage over competitors**
 - **Empowering others at their expense**

Laboratories

- Awareness
 - Widespread awareness of EHRs, HII
- Position
 - Supportive of increased efficiencies in availability & delivery of results (will pay for this)
- Concerns
 - Elimination of IT as customer loyalty tool
 - Reduced barriers to switching lab providers
 - Reduced testing volume

Pharmacies/PBMs

■ Awareness

- Moderate awareness of EHRs, HII
- Already heavily automated: pharmacies connected to clearinghouses, PBMs

■ Position

- Supportive of reducing administrative burden
- Pharmacies may pay for e-prescribing information (if legal)
- PBMs will need to be paid for information

■ Concerns

- Avoid duplicate systems

Pharmaceutical & Device Manufacturers

■ Awareness

- Recognized as double-edged sword
 - Increased compliance using decision support
 - More rapid detection of adverse events & poorly-performing products
 - Improved research & clinical trials

■ Position

- Watchful waiting

■ Concerns

- Full impact unclear
- How to use information without violating privacy

Government

■ Awareness

- Health care costs increasing burden
 - Medicare & Medicaid
- Growing awareness of potential savings from EHRs, HII

■ Position

- Supportive, but minimal funding available
- Not considered Federal responsibility
- States may invest, but need clear ROI

■ Concerns

- Privacy protection
- Very limited availability of new funds
- Dependable ROI for any expenditures

Public Health

■ Awareness

- Widespread awareness of EHRs, HII
- Incomplete understanding of potential impact

■ Position

- Watchful waiting; some participation
- Continuing to pursue own information silo activities (both existing and new)

■ Concerns

- HII development too slow for public health needs

Long-term Care

■ Awareness

- General awareness of EHRs, HII
- Few offerings for long-term care
 - Limited funds available for EHRs
 - Market failure (lack of demand)

■ Position

- Supportive of better information, especially when patients transferred
- Hopeful, but very little activity so far

■ Concerns

- Current reimbursement provides virtually no funds for IT systems

Consumers

■ Awareness

- Growing recognition of
 - Link between lack of information and errors
 - Need for EHRs, HII

■ Position

- Supportive IF they control their info
- Majority willing to pay minimal fees (\$5/month)

■ Concerns

- Privacy protection
- Trustworthiness of information custodian(s)

Questions?

William A. Yasnoff, MD, PhD, FACMI
william.yasnoff@nhiiadvisors.com
703/527-5678